MILITARY ACADEMY NOMINATIONS

Note: Fields marked with an asterisk (*) are required

Graduation Date

Your Information Prefix _____ First Name* Middle Name _____ Last Name* Date of Birth* _____/___ Gender * _____ Street Address*_____ Street Address (cont.) State* _____ Zip Code*_____ Email* _____ U.S. Citizen * ○ Yes ○ No If not, list your country of citizenship _____ Parents/Guardians* ______ Telephone Number* **Education Information** Name of High School* School Street Address* City* _____ State* ______ Zip Code* _____ Class Rank

Test Scores	
SAT Scores	
Math	_
Writing	_
Critical Reading	_
Composite	_
ACT Scores	
English	_
Math	_
Reading	_
Science	_
Composite	_
Academy Information	
If you have applied to more than one Academy, please rank y (4). NOTE: Please rank only the Academies to which you have a Information on applying to each of the Service Academies can	already submitted a formal application.
U.S. Air Force Academy	_
U.S. Merchant Marine Academy	_
U.S. Military Academy (West Point)	_
U.S. Naval Academy	_
An appointment to the Service Academies is based on a desire military service and implies recognition by the appointee of an him / herself to a military career. Are you interested in an appoint	obligation to the government to devote
○ Yes ○ No	
Additional Information	
Name of Hometown Paper:	
Is it okay to use your name in a press release if you receive a n	omination or appointment?
O Yes O No	

Please list your extra-curricular activities and leadership responsibilities:				
Please state your reasons for wanting a nomination to a service academy:				

APPLICATION AGREEMENT

Please read the following paragraph before signing the application, as your signature indicates your agreement with the following statements. If you do not include your signature, your application will not be considered for nomination:

It is my sincere desire to attend a U.S. Service Academy, and I intend to pursue a vigorous academic course of study if appointed. I understand that attending a service academy also requires a minimum of five years of military service following graduation, and I fully commit to this responsibility. I am a U.S. Citizen, or will be by July 1 of the year I will attend the Academy. I will be at least 17 years, but not yet 23 years of age, on July 1 of the year I attend the Academy. I am not married. I am not pregnant, nor do I have any child support obligations. I am a legal resident of the 2nd Congressional District of Indiana.

I certify that the information I have provided in the application packet is accurate. Any changes to this information will be reported immediately. Additionally, I understand that I will not be considered for a nomination if the required documents are incomplete or are not postmarked by the first Monday in November of the current year.

Signature:	 	
Date:	 	

Please sign and then mail or fax your request to:

Office of Congresswoman Jackie Walorski Attn: Academy Nominations 202 Lincolnway East, Suite #101 Mishawaka, IN 46544